PTO/SB/06 (08-03)
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U.S. Patient and Trademark Office; U.S. DEPARTMENT OF COMMERCE

PATEN	II AFFLICATIO	N FEE DETE	KMINATIU	N RECORD	formation uni	Applica	ays a valid OME	control number	7	
	SMALL ENTITY		OR	OTHER THAN SMALL: ENTITY		1 .				
FOR			NUMBER EXTRA			7			┥	
BASIC FEE (37 CFR 1.18(a))				RATE	1395	1	RATE	FEE	4 .	
TOTAL CLAIMS (37 CFR 1.16(c))		<u> </u>		100	13.10	OR	17:	1.790	4	
INDEPENDENT CLAIMS	minus 20	•4		x \$ 25 -		ĢR	x :50 ·		1	
(37 CFR 1.18(b))	minus 3			x s 100 =		OR	x 1500=		1	
MULTIPLE DEPENDENT C	+1.180=		OR	+,360.	1	1				
• If the difference in colum	TOTAL		OR	TÖTAL		1.				
CLAIN	IS AS AMENDED	- PART II					TOTAL		1	
	olumn 1)	(Column 2)	(Column 3)	SMALL E	NTITY	OR	OTHER SMALL	R THAN ENTITY		
~ .pc	MAINING AFTER ENDMENT		PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL	· · · .	
Total (37 CFR 1.18(c)) Total (37 CFR 1.18(c)) Total (37 CFR 1.18(b))	Minus Minus	:54		x s 25 -	. /	OR	x s <u>50</u> .	FEE		
(#7 CFR 1.18(b))		le /		x s 100 =	-	OR	x : <u>200</u> -			:
FIRST PRESENTATION	OF MULTIPLE DEPENDEN	IT CLAIM (37,CFR 1	.16(d))	+5	_/_	OR	+s =.		: 	
9/17/12		·.		TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		1	
m CI	lumn 1) LAIMS	(Column 2) (iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	Column 3)			.г	• •		·	
DI. A KEN	MAINING FTER NDMENT		RESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL		
AME Tibial (37 CFR 1.16(c)) Independent (37 CFR 1.16(c))	35 Minus	54 "	0	x:25.	7	OR I	.50.	FEE ·		
Independent (37 CFR 1.16(b))	4 Minus	6	2	xs/00 =		-	200.	\-/-/		
FIRST PRESENTATION O	F MULTIPLE DEPENDENT	CLAIM (37 CFR 1	(8/40)	1/2	λ		1/1	X - I		
***	•	10.01.1.	.o(o)/	+s/(V)= /		OR L	TOTAL /	\leftarrow		
				ADD'L FEE			OD'L FEE			
The second second section of the	mn 1),	(Column 2) (C	olumn 3)			٠				
REM	AINING TER PI	NUMBER. PF	RESENT EXTRA	T	ADDI- IONAL		RATE [*]	ADDI- TIONAL	•	
Total (37 CFR 1.15(c))	Minus **	- FAID FOR	 		FEE	}-		FEE .		
independent (ST CFR 1.16(b))	Minus ***			X \$=		OR X	<u></u>			
FIRST PRESENTATION OF		OR X	<u>\$</u> _		•					
		wrem to Crk 1.16		TOTAL	 '		S DTAL		:	•
* If the entry in column 1 is	less than the entry in c	olumo 2. write %" i	o ookuma 0	ADD'L FEE	•		DO'L FEE	·		. ·
"If the "Highest Number P	rovinink Daki Engliki T	MIC COACE IS ISSU	16	20 .				1		
The "Highest Number Pre	viousiv Paid For Otal	or Independent in	the bighost su	5°.			•	ı		

The "trignest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.